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**\*BIBDATASHEET\***

CONFIRMATION NO. 2075

Bib Data Sheet

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/796,808 | <b>FILING OR 371(c)<br/>DATE</b><br>03/08/2004<br><b>RULE</b> | <b>CLASS</b><br>438 | <b>GROUP ART UNIT</b><br>2823 | <b>ATTORNEY<br/>DOCKET NO.</b><br>29089.4300 |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/390,268 03/17/2003 PAT 6,927,411 which claims benefit of 60/364,547 03/15/2002

and is a CIP of 10/268,107 10/09/2002 PAT 6,985,378  
 which is a CIP of 10/118,276 04/08/2002 PAT 6,825,489 \*  
 which is a CIP of 09/502,915 02/11/2000 PAT 6,487,106 \*

This application 10/796,808

is a CIP of 09/951,882 09/10/2001 PAT 6,635,914

and claims benefit of 60/452,648 03/07/2003

and said 10/118,276 04/08/2002

claims benefit of 60/365,551 03/18/2002

and claims benefit of 60/365,602 03/18/2002

and claims benefit of 60/365,601 03/18/2002

(\*)Data provided by applicant is not consistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/27/2004

|  |                                   |                                |                               |                                    |
|--|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>AZ | <b>SHEETS<br/>DRAWING</b><br>3 | <b>TOTAL<br/>CLAIMS</b><br>33 | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                                |                               |                                    |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |                                   |                                |                               |                                    |

**ADDRESS**

20322

**TITLE**

PROGRAMMABLE STRUCTURE INCLUDING AN OXIDE ELECTROLYTE AND METHOD OF FORMING PROGRAMMABLE STRUCTURE

**FILING FEE  
RECEIVED**  
1334

FEES: Authority has been given in Paper  
 No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
 No. \_\_\_\_\_ for following:

☐ All Fees

☐ 1.16 Fees ( Filing )

☐ 1.17 Fees ( Processing Ext. of time )

☐ 1.18 Fees ( Issue )

VB  
5/30